



Using Evaluation to Implement Wraparound and Sustain Fidelity, Part 1: Fidelity Tools and Resources of the National Wraparound Initiative

**California Wraparound Institute
June 7, 2010**

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Agenda for the two sessions

- **Part 1: 10:30 – 12 noon**

- The theory of change for wraparound: What makes it work better for families?
- Implementation: How we get from theory to practice
- The role of measurement in implementation
- What is fidelity measurement?
- What is fidelity measurement in wraparound?
- The measures of the Wraparound Fidelity Assessment System
 - Wraparound Fidelity Index
 - Team Observation Measure
 - Document Review Measure
- Research on these tools
- How you and your program or community can use them

Agenda for the two sessions

- **Part 2: 1:30pm – 3:00pm**
 - Building meaningful youth involvement into wraparound
 - Community and system supports for wraparound: An overview
 - Measuring system support for wraparound: How it is measured
 - Activity: Community Support Jeopardy!
 - Review of wraparound outcomes studies



Many online resources available from The
National Wraparound Initiative

www.nwi.pdx.edu

Of particular interest to today's participants: *The Resource Guide to Wraparound*

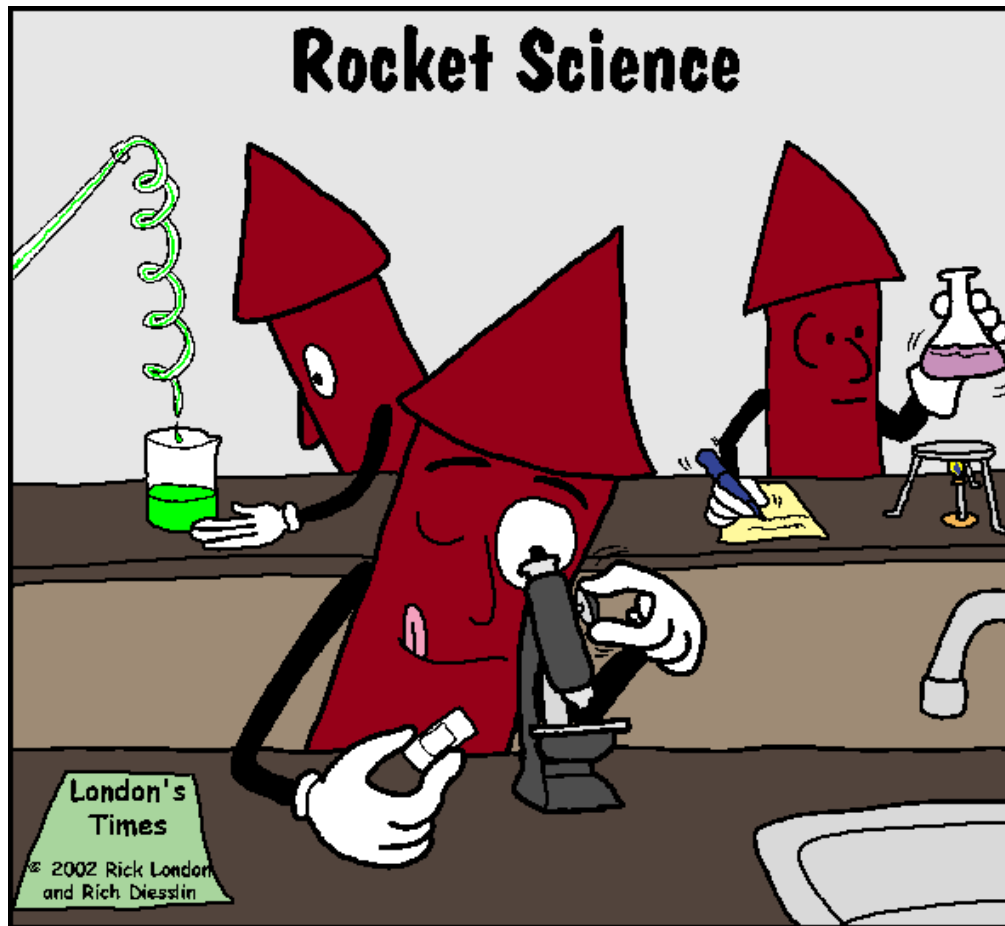
- Section 3: Theory and Research: Five Chapters
- Section 4: Wraparound Practice: Sixteen Chapters

Three Big Ideas for Session 1

- We need to move from principles to **practice** in doing wraparound
 - i.e., people who have the skills to accomplish the tasks that have been found to achieve outcomes
- The better we implement the practice, the better the outcomes will be for youth and families
- Measuring the quality of practice can help us accomplish both these goals:
 - Better fidelity
 - Better outcomes!

Key resource: National Implementation Research Network (NIRN): www.nirn.org

Implementing wraparound... as hard as...?



...brain surgery?



...landing a passenger plane on the Hudson?



Success!



Captain Sullenberger attributed it to:

- Teamwork
- Preparation
- Strict adherence to protocols

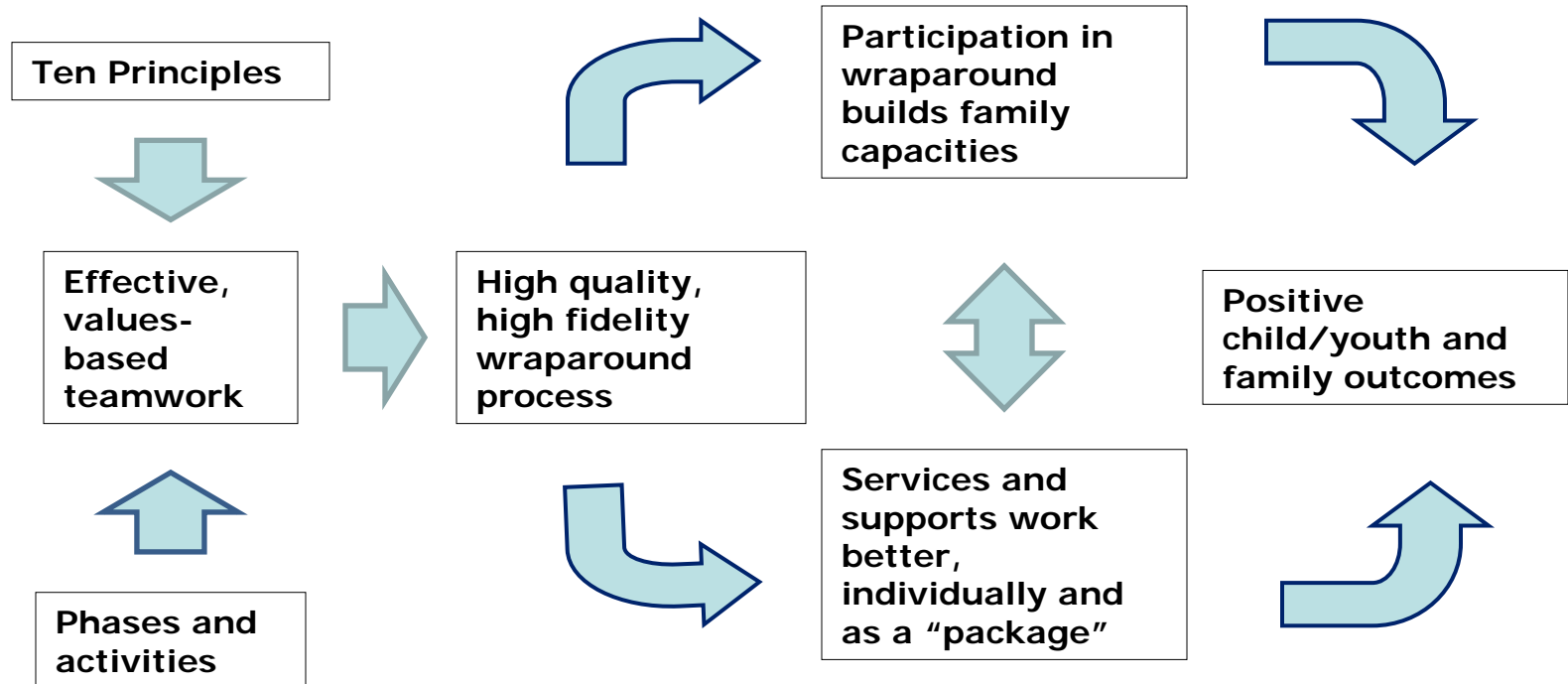
What leads to success in health care?

- **Knowledge** – Research and experience has provided us with information on “what works”
 - Evidence-based practice
 - Practice-based evidence
- **Competence** – Research and experience provide a solution, and we apply it correctly
 - Collecting and organizing information
 - Using information to make decisions

Knowledge: How does wraparound work?

What research tells us about practice, process and outcomes

Theory of change: Outline



Wraparound Knowledge

Major “routes” to outcomes and implications

- Effective team process means team is more likely to meet its goals
- Good, value-driven wraparound process leads to outcomes because
 - Services and supports work better
 - Family gains in self-efficacy, self-perceptions, and coping

Wraparound Competence

Applying the Wraparound Principles

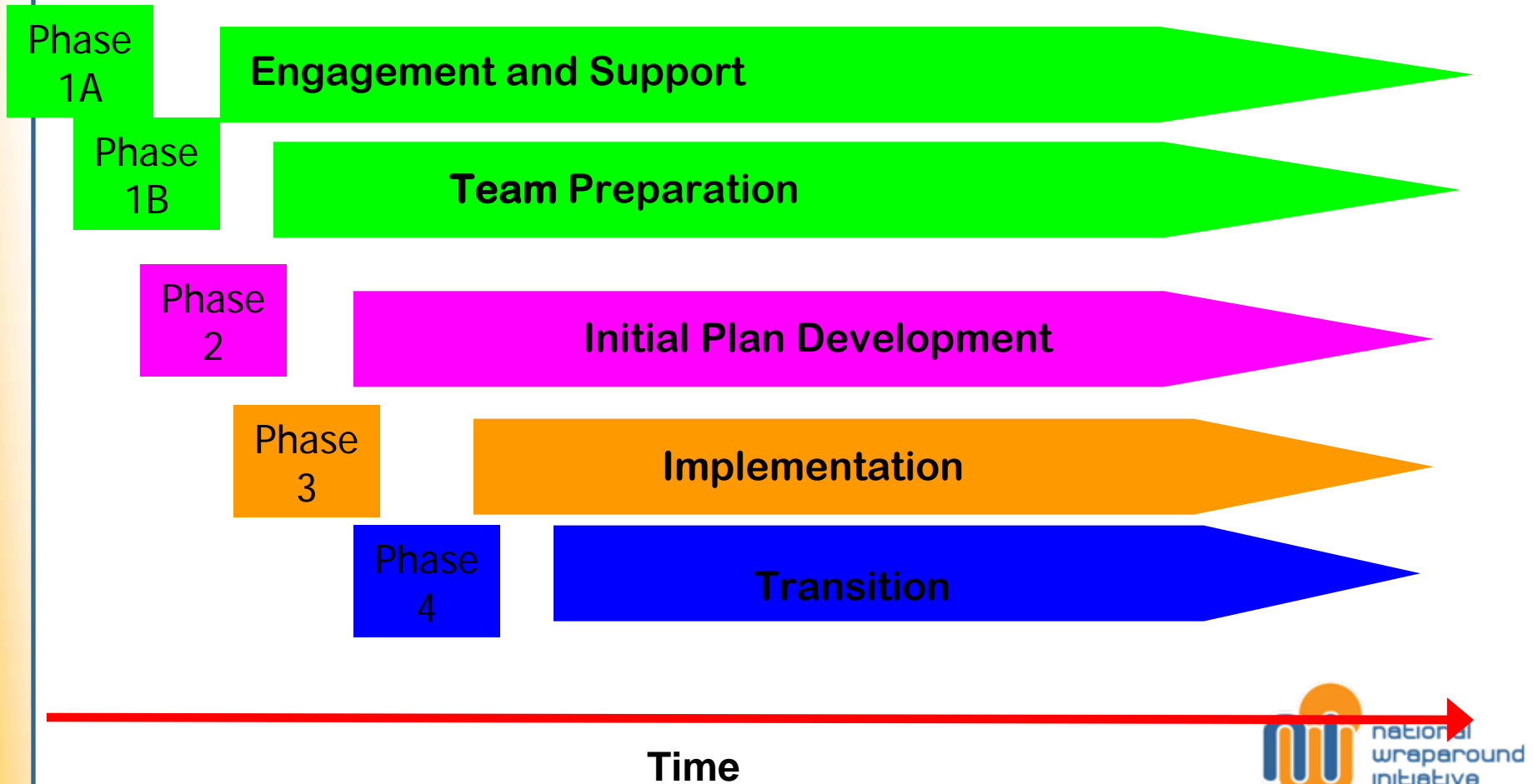
1. Family voice and choice
2. Team-based
3. Natural supports
4. Collaboration
5. Community-based
6. Culturally competent
7. Individualized
8. Strengths based
9. Persistence
10. Outcome-based

Walker, Bruns, Adams, Miles, Osher et al., 2004

Wraparound Competence

Implementing the practice model:

The Four Phases of Wraparound



Phase 1 : Engagement and Team Preparation

- Care Coordinator & Family Support Partner meets with the family to discuss the wraparound process and listen to the family's story.
- Discuss concerns, needs, hopes, dreams, and strengths.
- Listen to the family's vision for the future.
- Assess for safety and make a provisional crisis plan if needed
- Identify people who care about the family as well as people the family have found helpful for each family member.
- Reach agreement about who will come to a meeting to develop a plan and where we should have that meeting.

Phase 2: Initial Plan Development

- Conduct first Child & Family Team (CFT) meeting with people who are providing services to the family as well as people who are connected to the family in a supportive role.
- The team will:
 - Review the family vision
 - Develop a Mission Statement about what the team will be working on together
 - Review the family's needs
 - Come up with several different ways to meet those needs that match up with the family's strengths
- Different team members will take on different tasks that have been agreed to.

Phase 3: Plan Implementation

- Based on the CFT meetings, the team has created a written plan of care.
- Action steps have been created, team members are committed to do the work, and our team comes together regularly.
- When the team meets, it:
 - Reviews Accomplishments (what has been done and what's been going well);
 - Assesses whether the plan has been working to achieve the family's goals;
 - Adjusts things that aren't working within the plan;
 - Assigns new tasks to team members.

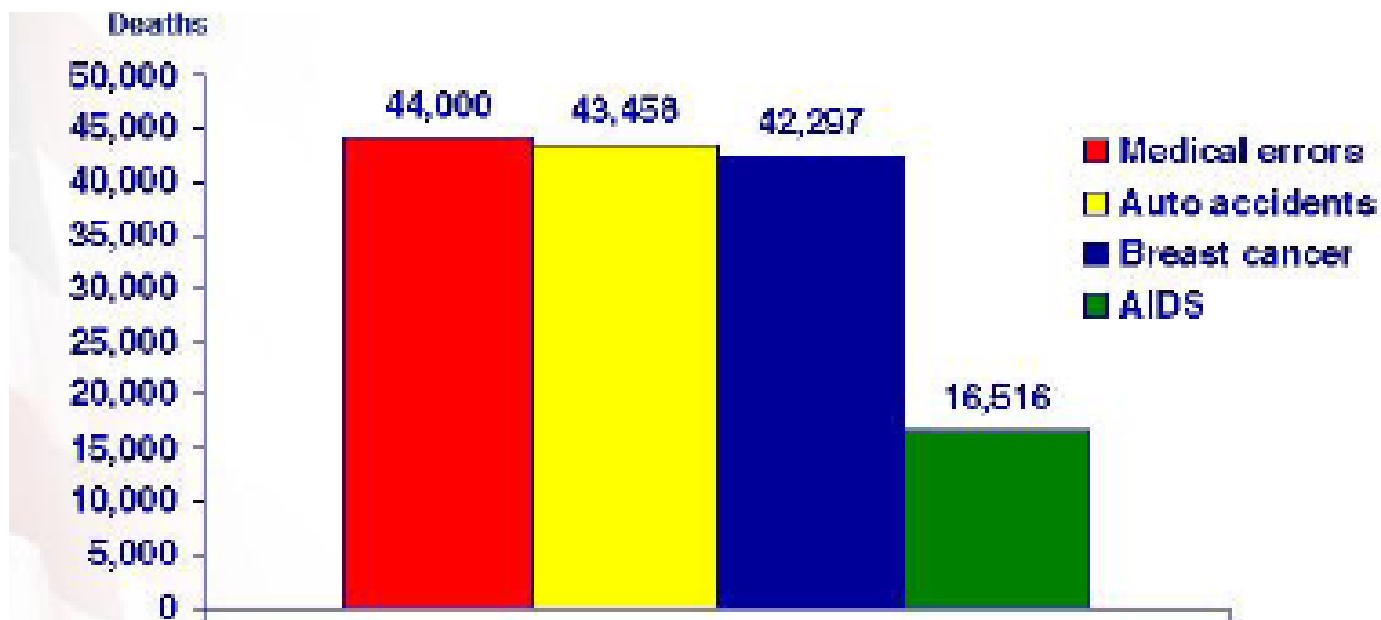
Phase 4: Transition

- There is a point when the team will no longer need to meet regularly.
- Transition out of Wraparound may involve a final meeting of the whole team, a small celebration, or simply the family deciding they are ready to move on.
- The family will get a record of what work was completed as well as list of what was accomplished.
- The team will also make a plan for the future, including who the family can call on if they need help or if they need to re-convene their team.
- Sometimes transition steps include the family and their supports practicing responses to crises or problems that may arise

How Do We Measure Competence?

- Example: Surgical Safety
 - 234 million operations each year
 - Many surgery complications and deaths are preventable

Deaths due to Medical Errors: U.S.



Source: The Institute of Medicine (IOM), *To Err is Human: Building a Safer Health System* (Washington, D.C. National Academy Press, 2000)

Note: Some deaths for cause other than medical errors are from the CDC, National Center for Health Statistics, Births and Deaths: Preliminary Data for 1999, *National Vital Statistics Reports*, (2000), accessed in *To Err is Human*.

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Measuring implementation in Surgery

- Sign In Checklist
 - Before the induction of anesthesia, members of the team orally confirm that:
 - The patient has verified his identity, surgical site, procedure, and consent
 - The surgical site is marked if appropriate
 - The pulse oximeter is on the patient and functioning
 - All members of the team are aware if the patient has an allergy
 - The patient's airway and risk of aspiration have been evaluated and appropriate equipment is on hand
 - Appropriate access to blood and fluids are available.

Measuring implementation in Surgery

- Time out Checklist
 - Before incision, the entire team orally:
 - Confirms that all team members have been introduced by name and role
 - Confirms the patient's identity, surgical site, and procedure
 - Reviews the anticipated critical events
 - Confirms that prophylactic antibiotics have been administered ≤ 60 min before incision or that they are not indicated
 - Confirms that all essential imaging results are displayed in the room

Measuring implementation

- Sign Out Checklist
 - Before the patient leaves the operating room, the nurse reviews items aloud with the team:
 - Name of the procedure as recorded
 - That the needle, sponge, and instrument counts are complete
 - That the specimen is correctly labeled
 - Whether there are any equipment issues
 - The team reviews aloud the key concerns for recovery and patient care

Results

<u>Complications</u>	<u>Before</u>	<u>After</u>	<u>p value</u>
Surgical site infection	6.2	3.4	< .001
Death	1.5	0.8	< .01

<u>Process Measures</u>	<u>Before</u>	<u>After</u>	<u>p value</u>
Prophylactic antibiotics given	56.1	82.6	< .001
Orally confirming patient's identity	54.4	92.3	< .001

Implications

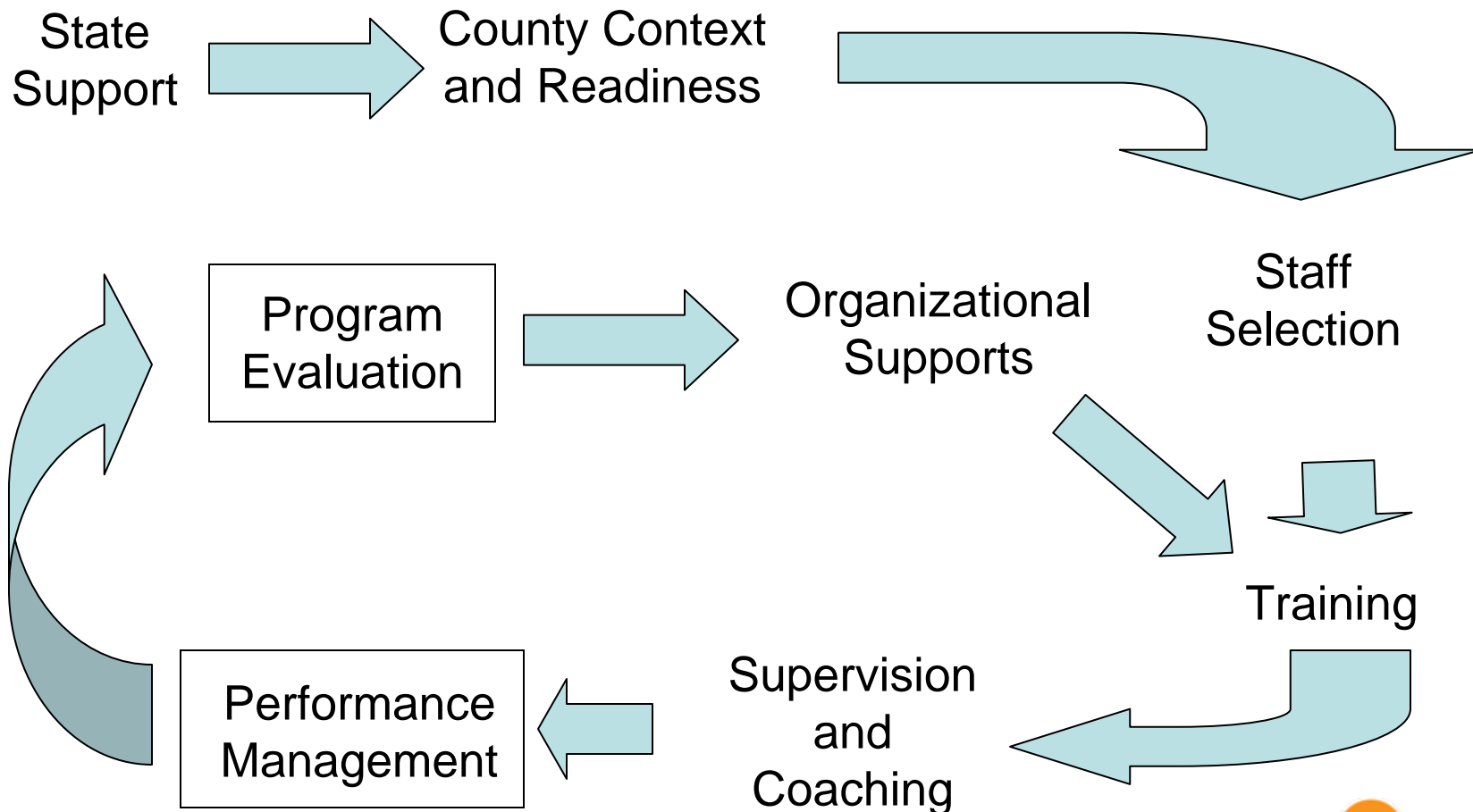
- What did the checklist accomplish?
 - Ensured similar information for all team members
 - Improved team communication
 - Improved consistency of care across teams

Why do we need implementation quality checks in wraparound?

Studies indicate that Wraparound teams often fail to:

- Incorporate full complement of key individuals on the Wraparound team;
- Engage youth in community activities, things they do well, or activities to help develop friendships;
- Use family/community strengths to plan/implement services;
- Engage natural supports, such as extended family members and community members;
- Use flexible funds to help implement strategies
- Consistently assess outcomes and satisfaction.

Implementation with High Fidelity Requires...



How might we measure implementation of wraparound???

- Have facilitators and team members fill out activity checklists
- Look at plans of care and meeting notes
- Sit in on and observe team meetings
- Interview the people who know—parents, youth, facilitators, program heads



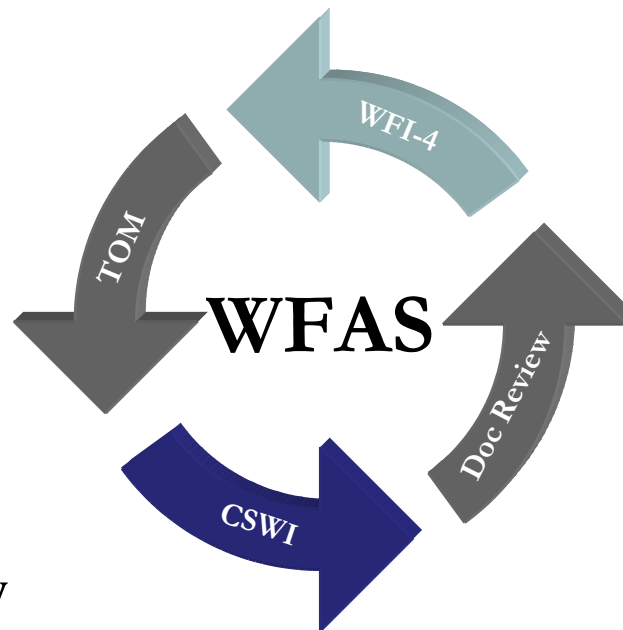
Wraparound Fidelity Assessment System

www.wrapinfo.org or

<http://depts.washington.edu/wrapeval>

TOM – Team
Observation
Measure

WFI-4 –
Wraparound
Fidelity Index



CSWI – Community
Supports for
Wraparound
Inventory

DRM - Document
Review Measure

The Wraparound Fidelity Index, version 4

- Assesses implementation of the wraparound process through brief interviews with multiple respondents
 - Caregivers
 - Youths
 - Wraparound Facilitators
 - Team Members
- Found to possess good psychometric characteristics
 - Test-retest reliability
 - Inter-rater agreement
 - Internal consistency
- Used in research on wraparound
- Even more widely as a quality assurance mechanism by wrap programs

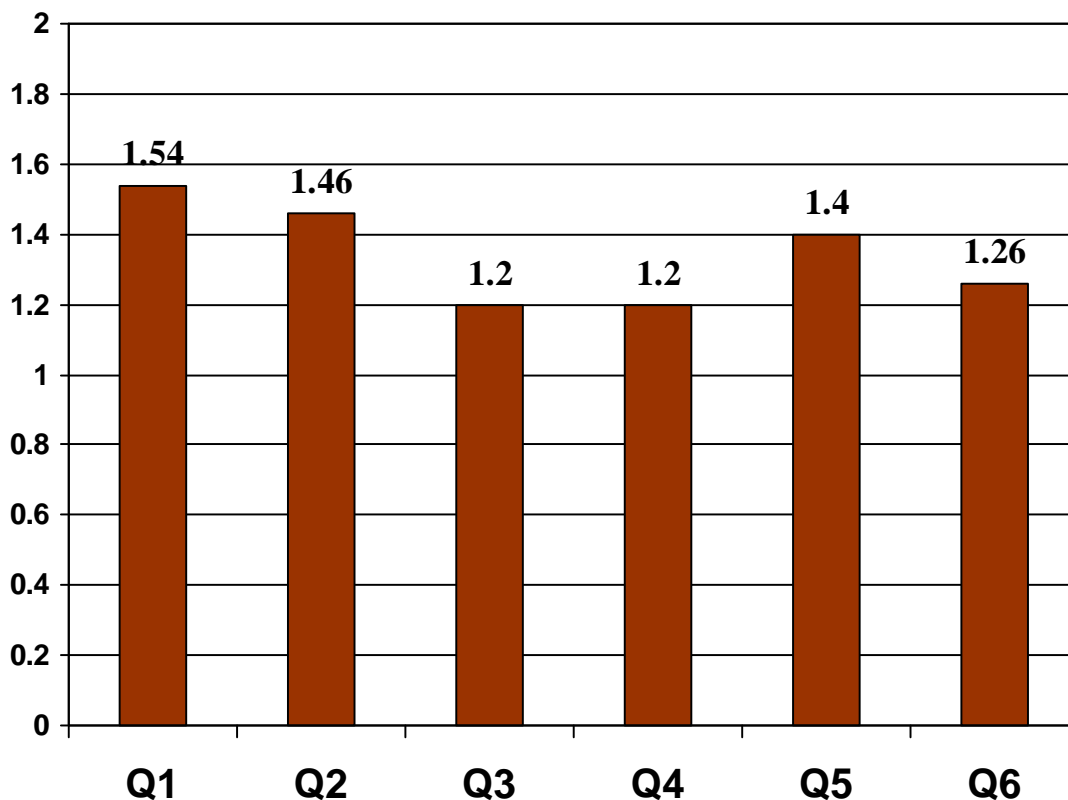
Wraparound Fidelity Index, v.4

- Items on the principles and core activities, organized by the 4 phases of wraparound
 - **Engagement:** Did you select the people who would be on your youth and family team?
 - Principle = Team based
 - **Planning:** Does the plan include strategies for helping your child get involved with activities in the community?
 - Principle = Community based
 - **Implementation:** Does the team evaluate progress toward the goals of the plan at every team meeting?
 - Principle = Outcome based
 - **Transition:** Will some members of your team be there to support you when formal wraparound is complete?
 - Principle = Persistence

WFI Items: Engagement and Team Preparation Phase

Phase 1: Engagement		Yes	Sometimes Somewhat	No
1. CC	When you first met your wraparound facilitator, were you given time to talk about your family's strengths, beliefs, and traditions? <i>Circle one: YES NO</i>	YES to both questions	YES to only the first question	NO to the first question
	Did this process help you appreciate what is special about your family? <i>Circle one: YES NO</i>	2	1	0
2. FVC	Before your first team meeting, did your wraparound facilitator fully explain the wraparound process and the choices you could make?	2	1	0
3. SB	At the beginning of the wraparound process, did you have a chance to tell your wraparound facilitator what things have worked in the past for your child and family?	2	1	0
4. TB	Did you select the people who would be on your wraparound team?	2	1	0
5. TB	Is it difficult to get agency representatives and other team members to attend team meetings when they are needed?	0	1	2
6. OB	Before your first wraparound team meeting, did you go through a process of identifying what leads to crises or dangerous situations for your child and your family?	2	1	0

Reports from the WFI: Individual items (Engagement phase)



Q1. Were you given time to talk about your family's strengths, beliefs, and traditions?

True - 10 Partly True - 3 Not True - 2

Q2. Did your facilitator fully explain wraparound & the choices you could make?

True - 9 Partly True - 4 Not True - 2

Q3. Did you have a chance to tell your wraparound facilitator what has worked in the past for your child and family?

True - 7 Partly True - 4 Not True - 4

Q4. Did you select the people who would be on your wraparound team?

True - 7 Partly True - 4 Not True - 4

Q5. Is it difficult to get team members to meetings when they are needed?

True - 9 Partly True - 3 Not True - 3

Q6. Did you go through a process of identifying what leads to crises for yr family?

True - 8 Partly True - 3 Not True - 4

Team Observation Measure

- The Team Observation Measure (TOM) is employed by external evaluators to assess adherence to standards of high-quality wraparound during team meeting sessions.
- It consists of 20 items, with two items dedicated to each of the 10 principles of wraparound.
- Each item consists of 3-5 indicators of high-quality wraparound practice as expressed during a child and family team meeting.
- Internal consistency very good
- Inter-rater reliability found to be adequate (Average 79% agreement for all indicators)

Sample TOM report:

Most frequently observed TOM indicators

#	Item	Pct.	SD
20a	The team's mission and/or needs support the youth's integration into the least restrictive residential and educational environments possible	96%	.208
1a	Parent/caregiver is a team member and present at meeting	92%	.266
12e	Members of the team use language the family can understand	92%	.271
18d	Serious challenges are discussed in terms of finding solutions, not termination of services or sanctions.	91%	.288
3a	There is a written agenda or outline for the meeting, which provides an understanding of the overall purpose of meeting	89%	.320
11e	Talk is well distributed across team members and each team member makes an extended or important contribution	89%	.320
18e	There is a sense of openness and trust among team members	89%	.320
20d	Serious behavioral challenges are discussed in terms of finding solutions, not placement in more restrictive residential or educational environments	89%	.332

Sample TOM report:

Least frequently observed TOM indicators

#	Item	Pct	SD
8a	In designing strategies, team members consider and build on strengths of the youth and family	28%	.458
13b	The team assesses goals/strategies using measures of progress	26%	.446
5d	The facilitator leads a robust brainstorming process to develop multiple options to meet priority needs.	23%	.429
7c	Community team members and natural supports have a clear role on the team	23%	.429
14a	The team conducts a systematic review of members' progress on assigned action steps	23%	.429
19a	The team is actively brainstorming and facilitating community activities for the youth and family	23%	.429
8b	The plan of care represents a balance between formal services and informal supports	17%	.380
1c	Key natural supports for the family are team members and present	11%	.362

Document Review Measure

- Consists of 20 items
- Each wraparound principle linked to 3 items
- Scale = 0-4, with criteria for each point on the scale
- Source material = documentation (electronic or paper) related to youth's wraparound process
 - Strengths, needs, culture discovery documentation
 - Wraparound plan of care
 - Crisis plan
 - Transition plan
 - Progress notes

What else can we do?

- Take the monitoring example to the wraparound team level
 - Develop a “dashboard” with key outcomes and processes to track
 - Things you can measure:
 - Core outcomes (Residential, school, staying out of trouble)
 - The team’s goals and progress toward them
 - Social connectedness of the youth and family
 - How well the team thinks it is functioning
 - The NWI is currently working on this...

What is the connection between fidelity and outcomes with wraparound?

- Families who experience better outcomes have staff who score higher on fidelity tools (Bruns, Rast et al., 2006; Efland, McIntyre, & Walton, 2010)



- Wraparound initiatives with positive fidelity assessments demonstrate more positive outcomes (Bruns, Leverentz-Brady, & Suter, 2008)

Relationship between WFI fidelity and outcome

Level of Wraparound Fidelity	# of Youth with at least one WFI & CANS outcomes	% with Reliable Improvement In CANS score
High (>85%)	28	82.1
Adequate (75-85%)	41	65.9
Borderline (65-75%)	13	69.2
Not Wraparound (<65%)	9	55.6

Effland, McIntyre, & Walton, 2010

What does it take to get high fidelity scores?



- Training and coaching found to be associated with gains in fidelity and higher fidelity
- Communities with better developed supports for wraparound show higher fidelity scores
 - Measuring fidelity is a major part of the community's effort to maintain high fidelity
 - "What gets measured gets done"
 - Who should be involved?
 - Trainers and coaches, supervisors, evaluators and community teams

In Part 2 of our session...



Also in part 2...

- Youth participation in wraparound
- Achieve My Plan!
- Outcomes of wraparound from national studies



Resources and Websites

- www.nwi.pdx.edu!
- www.wrapinfo.org – Portal to
 - *The Resource Guide to Wraparound*
 - Website of the National Wraparound Initiative (NWI)
 - Wraparound Evaluation and Research Team (WERT) – wraparound fidelity tools
- Other wraparound resources:
 - www.Paperboat.org
 - <http://www.milwaukeecounty.org/WraparoundMilwaukee7851.htm>
 - www.tapartnership.org
 - www.systemsofcare.samhsa.gov



The **National Wraparound Initiative** is based in Portland, Oregon. For more information, visit our website:

www.nwi.pdx.edu



The National Wraparound Initiative is funded by the Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, United States Department of Health and Human Services.